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PTO/SB/01 (12-97)  
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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing  OR  <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Docket Number</b>	MCP 102
	<b>First Named Inventor</b>	John T. Santini, Jr.
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	09 / 715,493
	<b>Filing Date</b>	November 17, 2000
	<b>Group Art Unit</b>	
	<b>Examiner Name</b>	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**MICROFABRICATED DEVICES FOR THE DELIVERY OF  
MOLECULES INTO A CARRIER FLUID**

the specification of which  
☐ is attached hereto  
OR  
☒ was filed on (MM/DD/YYYY) **11/17/2000** as United States Application Number or PCT International  
Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/166,370	11/17/1999	

[Page 1 of 2]

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MCP 102  
14581/4

Filed: November 17, 2000

MICROFABRICATED DEVICES FOR THE DELIVERY OF MOLECULES INTO A CARRIER FLUID

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number  OR  
☒ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number
Patrea L. Pabst	31,284		
Robert A. Hodges	41,074		
Kevin W. King	42,737		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number  OR ☒ Correspondence address below

Name	Patrea L. Pabst				
Address	Arnall Golden & Gregory, LLP				
Address	2800 One Atlantic Center, 1201 West Peachtree Street				
City	Atlanta	State	GA	ZIP	30309-3450
Country	United States	Telephone	(404)873-8794	Fax	(404)873-8795

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname					
John T.		Santini, Jr.					
Inventor's Signature	<i>John T. Santini, Jr.</i>			Date	12-13-00		
Residence: City	Belmont	State	MA	Country	US	Citizenship	US
Post Office Address	64 Winslow Road						
Post Office Address							
City	Belmont	State	MA	ZIP	02478	Country	US

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Filed: November 17, 2000

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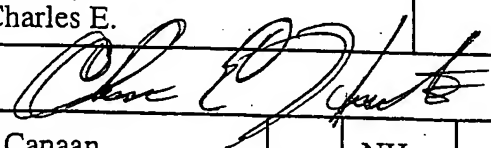
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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Charles E.				Hutchinson			
Inventor's Signature						Date	
Residence: City	Canaan	State	NH	Country	US	Citizenship	US
Post Office Address	Apple Blossom Lane						
Post Office Address							
City	Canaan	State	NH	ZIP	03741	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Scott A.				Uhland			
Inventor's Signature						Date	
Residence: City	Somerville	State	MA	Country	US	Citizenship	US
Post Office Address	12 Curtis Street, Apartment No. 3						
Post Office Address							
City	Somerville	State	MA	ZIP	02144	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Michael J.				Cima			
Inventor's Signature						Date	
Residence: City	Winchester	State	MA	Country	US	Citizenship	US
Post Office Address	184 Mystic Valley Parkway						
Post Office Address							
City	Winchester	State	MA	ZIP	01890	Country	US

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Supplemental Sheet

Page 1 of 2

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

Charles E.

Hutchinson

Inventor's  
Signature

Date

Residence: City

Canaan

State

NH

Country

US

Citizenship

US

Post Office Address

Apple Blossom Lane

Post Office Address

City

Canaan

State

NH

ZIP

03741

Country

US

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Given Name (first and middle (if any))

Family Name or Surname

Scott A.

Uhland

Inventor's  
Signature

Date

12/12/00

Residence: City

Somerville

State

MA

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US

Citizenship

US

Post Office Address

12 Curtis Street, Apartment No. 3

Post Office Address

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Somerville

State

MA

ZIP

02144

Country

US

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

Michael J.

Cima

Inventor's  
Signature

Date

Residence: City

Winchester

State

MA

Country

US

Citizenship

US

Post Office Address

184 Mystic Valley Parkway

Post Office Address

City

Winchester

State

MA

ZIP

01890

Country

US

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MCP 102

14581/4

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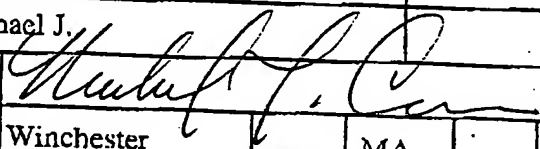
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Inventor's Signature						Date	
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Inventor's Signature						Date	11/9/01
Residence: City	Winchester	State	MA	Country	US	Citizenship	US
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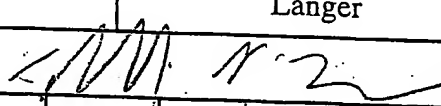
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Robert S.		Langer					
Inventor's Signature						Date	11/28/00
Residence: City	Newton	State	MA	Country	US	Citizenship	US
Post Office Address	77 Lombard Street						
Post Office Address							
City	Newton	State	MA	ZIP	02458	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Dennis		Ausiello					
Inventor's Signature						Date	
Residence: City	Wellsley Hill	State	MA	Country	US	Citizenship	US
Post Office Address	38 Bradford Road						
Post Office Address							
City	Wellsley Hill	State	MA	ZIP	02481	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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Given Name (first and middle (if any))				Family Name or Surname			
Robert S.				Langer			
Inventor's Signature						Date	
Residence: City	Newton	State	MA	Country	US	Citizenship	US
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Post Office Address							
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Dennis				Ausiello			
Inventor's Signature	<i>Dennis A. Ausiello MD</i>					Date	11/27/00
Residence: City	Wellsley Hill	State	MA	Country	US	Citizenship	US
Post Office Address	38 Bradford Road						
Post Office Address							
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